



Dean S Reynolds, OD  
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## **PATIENT RIGHTS & RESPONSIBILITIES**

City of Vision Eye Care has a tradition of excellent medical care for all of its patients. As part of this commitment to quality care, City of Vision Eye Care supports a patient's right to participate in the healthcare decisions that affect his or her well-being. It is our goal to provide medical eye care that is effective and considerate within our capacity, mission and philosophy, applicable to law and regulation. The Patient's Bill of Rights reflects the interests of our staff who enthusiastically endorses its principles.

### **PATIENT RIGHTS**

- A patient has the right to have informed participation in decisions relating to his or her medical care.
- Except in emergencies, patients have the right to receive, in advance of treatment or contemplated procedure, a full explanation from their physician so that they may exercise their right of informed consent.
- A patient has the right to refuse drugs or procedures, to the extent permitted by statute, and a practitioner shall inform the patient of the medical consequences of the patient's refusal of drugs or procedures.
- A patient has the right to medical services without discrimination based upon age, race, color, religion, sex, national origin, handicap, disability, or source of payment.
- A patient, or patient designee, shall have access to the information contained in his or her medical records upon request unless access is specifically restricted by the attending practitioner for medical reasons.
- A patient has the right to confidentiality of all information except as otherwise provided by law or by his or her agreement to arrangements with third-party payers.
- A patient has the right to expect good management techniques to be implemented. These techniques shall make effective use of the time of the patient and avoid the personal discomfort of the patient.
- A patient has the right to examine and receive a detailed explanation of his or her bill.
- A patient has the right to expect that City of Vision Eye Care will provide information for continuing health care requirements following discharge and the means for meeting them.
- A patient has the right to change their primary or specialty physician if other qualified physicians are available.
- A patient has the right to obtain provider credentialing information.
- A patient has the right to exercise his or her rights without being subject to discrimination or reprisal.
- A patient has the right to voice grievances regarding treatment or care that is or fails to be given.



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### **PATIENT RESPONSIBILITIES**

- A patient is expected to provide, to the best of his or her knowledge, accurate and complete information about his or her present complaint, past illnesses, hospitalizations, medications including over-the-counter products and dietary supplements and any allergies or sensitivities and other matters relating to his or her health.
- A patient is expected to cooperate with the planned care and treatment at City of Vision Eye Care.
- A patient is expected to be aware of and sensitive to the needs of other patients, and respectful of the property of other patients, and be respectful of all healthcare providers and staff.
- A patient is expected to conduct themselves in a professional manner and use a language and volume appropriate for a healthcare setting when interacting with City of Vision Eye Care.
- A patient has the responsibility to meet financial obligations to City of Vision Eye Care and the physician for the services rendered.
- A patient's activities must be consistent with the policies and procedures of City of Vision Eye Care that relate to patient care and conduct. The patient and any accompanying members are expected not to engage in any activity that is in violation of those policies and procedures.
- Any patient that does not follow the plan of care prescribed for his or her ocular health, or who does not adhere to these Patient Responsibilities, may be dismissed from care at City of Vision Eye Care.
- A patient is responsible for informing his/her provider about any living will, medical power of attorney, or other directive that could affect his or her care.

### **Comments or complaints may be forwarded to:**

City of Vision Eye Care  
Attn: Patient Advocacy  
4025 Jackie Road SE  
Rio Rancho, NM 87124